



Docket No.: TMS 2217

1615

CERTIFICATION OF MAILING OR TRANSMISSION

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Werner H. Stemer

October 20, 2006

Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applic. No. : 10/538,168
Inventor : Markus Anliker
Filed : June 9, 2005
Title : Suppository Packaging Device
TC/A.U. : 1615
Customer No. : 24131

Hon. Commissioner for Patents
Alexandria, VA 22313-1450

LETTER

Sir:

Applicant herewith submits an executed *Power of Attorney* on October 20, 2006 for the above-identified application. The entry of the *Power of Attorney* is respectfully requested so as to ensure that all further correspondence in this application be sent to the address associated with Customer No. 24131.

Respectfully submitted,

Werner H. Stemer (34,956)

Date: October 20, 2006
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PTO/SB/01 (01-06)

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/538,168
Filing Date	June 9, 2005
First Named Inventor	Markus Anliker
Title	Suppository Packaging Device
Art Unit	1615
Examiner Name	N/A
Attorney Docket Number	TME-2217

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

24131

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

24131

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City		State	
Country		Zip	
Telephone		Email	

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Markus Anliker</i>	Date	20-10-06
Name	Markus Anliker	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of one (1) forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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